

**UNITED STATES BANKRUPTCY COURT  
FOR THE EASTERN DISTRICT OF OKLAHOMA**

In re: Glover, Tracy Lynn	)	
	)	Case No.: 08-81404
Glover, Rhonda Kay	)	Chapter 7
Freeman	)	
Debtor(s)	)	

**AMENDMENT TO SCHEDULES**

**COMES NOW**, the above named debtor(s), and hereby amends the following schedules:

Schedule D, Schedule F, Mailing Matrix, and Statement of Intent

/s/Jimmy L. Veith  
Jimmy L. Veith, PC, #9222  
Attorney at Law  
P.O. Box 607  
120 A St NW  
Ardmore, OK 73402  
Phone: (580)226-2353  
Fax: (580)226-2819

**VERIFICATION**

I declare under penalty of perjury that the information contained in the above described schedules and any attachments thereto are true and correct.

Date: 12/17/08 Tracy L. Glover  
Tracy Lynn Glover

Date: 12/17/08 Rhonda Kay Glover  
Rhonda Kay Glover

**AFFIDAVIT OF SERVICE**

I hereby certify that on the 22nd day of December, 2008 a true and correct copy of this Pleading was mailed to all creditors listed on the amended mailing matrix and electronic notification was sent to the Chapter 7 Trustee and the U.S. Trustee.

/s/Jimmy L. Veith  
Jimmy L. Veith, PC #9222

## AMENDED SCHEDULE D - CREDITORS HOLDING GENERAL SECURED CLAIMS

All claims secured by property of the debtor are listed below. Each column contains the following information:

**CREDITOR:**

Name, address and zip code of the creditor, & account and loan number if available.

**COMMENTS:** 1st line - amount owed

2nd line - date claim was incurred

3rd line - whether debt is joint, husband, wife, community

4th line - whether contingent, unliquidated or disputed

5th line - name of codebtor other than spouse in joint case

6th line - consideration & misc. information

P?: "P" if lien is purchase money,

"N" if lien is non-purchase money.

**COLLATERAL:** Description of Collateral

**F.M.V.:** Fair market value of collateral.

CREDITOR	COMMENTS	P?	COLLATERAL	VALUE
American Financial Services, Inc. PO Box 707 Durant, OK 74701 2938	\$4,400.00 10/15/08 Husband Only	N	1997 Chevrolet Pickup	\$5,250.00
			Total:	\$5,250.00
Vehicle				

**Total Amt:** **\$94,813.86** (Includes amounts from previously filed schedules.)

# **AMENDED SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

All unsecured nonpriority claims are listed below. Each column contains the following information:

**CREDITOR:** Name, address and zip code of the creditor, account or loan number, name of codebtor other than a spouse in a joint case.

**COMMENTS:** 1st line - amount owed  
2nd line - date claim was incurred  
3rd line - whether debt is joint, husband, wife, community  
4th line - whether contingent, unliquidated or disputed  
5th line - consideration and misc. comments.

CREDITOR	COMMENTS	CREDITOR	COMMENTS
<b>American Financial Services, Inc.</b>	<b>\$212.22</b>		
PO Box 707	11/16/07		
Durant, OK 74701	Husband Only		
2638	Loan		
<b>Eastern Oklahoma Ear Nose</b>	<b>\$734.90</b>		
5020 E. 68th St.	7/2008		
Tulsa, OK 74136	Wife Only		
196134	Medical		
<b>Genesis Financial Solutions, Inc.</b>	<b>\$3,181.60</b>		
Re: Mercantile Bank of Illinois	2002/2003		
PO Box 4865	Husband Only		
Beaverton, OK 97076			
4746721030350062	Credit Card		
<b>International Portfolio Inc.</b>	<b>\$1,723.00</b>		
c/o Frost-Arnett Company	2003		
PO Box 198933	Wife Only		
Nashville, TN 37219-8988			
8702066676; T09214	Medical		
<b>International Portfolio Inc.</b>	<b>\$2,448.98</b>		
c/o Frost-Arnett Company	2003/2004		
PO Box 198933	Wife Only		
Nashville, TN 37219-8988			
870-6161781; T09215	Medical		
<b>Lonestar Urology Clinic</b>	<b>\$83.00</b>		
c/o CBSA Collections	9/18/2002		
PO Box 1929	Wife Only		
Stillwater, OK 74076-1929			
2138270	Medical		

American Financial Services, Inc.  
PO Box 707  
Durant, OK 74701  
\*\*

Eastern Oklahoma Ear Nose Throat  
5020 E. 68th St.  
Tulsa, OK 74136  
\*\*

Frost-Arnett  
2450 Severn Ave. Ste. 218  
Metairie, LA 70001  
\*\*

Genesis Financial Solutions, Inc.  
Re: Mercantile Bank of Illinois  
PO Box 4865  
Beaverton, OK 97076  
\*\*

International Portfolio Inc.  
c/o Frost-Arnett Company  
PO Box 198933  
Nashville, TN 37219-8988  
\*\*

Lonestar Urology Clinic  
c/o CBSA Collections  
PO Box 1929  
Stillwater, OK 74076-1929  
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**UNITED STATES BANKRUPTCY COURT  
EASTERN DISTRICT OF OKLAHOMA**

Glover , Tracy Lynn  
Glover , Rhonda Kay

)  
)

Case No.08-81404  
Chapter 7

**CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION**

**PART A** - Debts secured by property of the estate. (Part A must be fully completed for EACH debt which is secured by property of the estate. Attach additional pages if necessary.)

NAME OF CREDITOR	COLLATERAL	INTENTION
American Financial Services, Inc.	1997 Chevrolet Pickup	Keep Reaffirm - Same Terms

Property is (check one)

☒ Claimed as exempt ☐ Not claimed as exempt

Cavalry Portfolio Services, LLC	Homestead-Judgment Lien	Avoid
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Property is (check one)

☐ Claimed as exempt ☒ Not claimed as exempt

Choctaw Nation of Oklahoma HR	401K	Keep Reaffirm - Same Terms
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Property is (check one)

☒ Claimed as exempt ☐ Not claimed as exempt

Credit Acceptance Corporation	Homestead-Judgment Lien	Avoid
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Property is (check one)

☐ Claimed as exempt ☒ Not claimed as exempt

First United Bank & Trust Co.	Homestead	Keep Reaffirm - Same Terms
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Property is (check one)

☒ Claimed as exempt ☐ Not claimed as exempt

H. C. Rustin Corp. dba Rustin	401K	Keep Reaffirm - Same Terms
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Property is (check one)

☒ Claimed as exempt ☐ Not claimed as exempt

Oklahoma Dept. of Human Services	Homestead-judgment lien	Keep Reaffirm - Same Terms
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Property is (check one)

☐ Claimed as exempt ☒ Not claimed as exempt

DECLARATION OF DISCOVERY

STATE OF CALIFORNIA  
COUNTY OF SAN DIEGO

FILED  
CLERK OF SUPERIOR COURT

IN RE: THE ESTATE OF [Name], Deceased

Case No. [Number]

I, [Name], being duly sworn, depose and say that the foregoing is a true and correct copy of the [document type] as the same appears in the files of the [entity].

Subscribed and sworn to before me this [Date] day of [Month], 2008.

Notary Public for the State of California

My Commission Expires on [Date]

Notary Public for the State of California

My Commission Expires on [Date]

Notary Public for the State of California

My Commission Expires on [Date]

Notary Public for the State of California

My Commission Expires on [Date]

Notary Public for the State of California

My Commission Expires on [Date]

Notary Public for the State of California

My Commission Expires on [Date]

Notary Public for the State of California

My Commission Expires on [Date]

Notary Public for the State of California

My Commission Expires on [Date]



NAME OF CREDITOR	COLLATERAL	INTENTION	
Oklahoma Dept. of Human Services	Homestead-Judgment Lien	Keep	Reaffirm - Same Terms

Property is (check one)

☐ Claimed as exempt

☒ Not claimed as exempt

Oklahoma Dept. of Human Services Homestead-Judgment Lien Keep

Property is (check one)

☐ Claimed as exempt

☒ Not claimed as exempt

Sooner Credit Corp. 2003 Jeep Grand Cherokee Keep Reaffirm - Same Terms

Property is (check one)

☒ Claimed as exempt

☐ Not claimed as exempt

**PART B** - Personal property subject to unexpired leases. (All three columns of Part B must be completed for each unexpired lease. Attach additional pages if necessary.)

Property No. 1		
Lessor's Name:	Describe Leased Property:	Lease will be Assumed pursuant to 11 USC 365(p)(2): <input type="checkbox"/> YES <input type="checkbox"/> NO
Property No. 2		
Lessor's Name:	Describe Leased Property:	Lease will be Assumed pursuant to 11 USC 365(p)(2): <input type="checkbox"/> YES <input type="checkbox"/> NO

I declare under penalty of perjury that the above indicates my intention as to any property of my estate securing a debt and/or personal property subject to an unexpired lease.

Date:

12/18/08

Signature of Debtor

*[Handwritten Signature]*

Signature of Joint Debtor

*[Handwritten Signature]*

